

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10586082		FILING DATE				
CLAIMS							APPLICANT(S)						
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/				51						
2		-		-			52						
3		-		-			53						
4		-		-			54						
5		-		-			55						
6		-		-			56						
7		-		-			57						
8		-		-			58						
9		-		-			59						
10		-		-			60						
11		-		-			61						
12		-		-			62						
13		-		-			63						
14		-		-			64						
15	/		/				65						
16		-		-			66						
17		-		-			67						
18		-		-			68						
19		-		-			69						
20		-		-			70						
21		-		-			71						
22		-		-			72						
23		-		-			73						
24		-		-			74						
25		-		-			75						
26		-		-			76						
27		-		-			77						
28		-		-			78						
29		-		-			79						
30		-		-			80						
31		-		-			81						
32		-		-			82						
33		-		-			83						
34		-		-			84						
35		-		-			85						
36		-		-			86						
37		-		-			87						
38		-		-			88						
39		-		-			89						
40		-		-			90						
41		-		-			91						
42		-		-			92						
43		-		-			93						
44		-		-			94						
45		-		-			95						
46		-		-			96						
47		-		-			97						
48		-		-			98						
49		-		-			99						
50		-		-			100						
TOTAL IND.	2	↓	2	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	29	←	29	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	31		29				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)

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